

The Taiwan Declaration on the integration of oral and general health, 29.4.2019

Oral health is as important as all other aspects general health. Nevertheless, oral health is frequently separated from prevention, primary and specialised medical care. Oral health shares risk factors with other NCDs and presents the same inequality and syndemics issues: the most vulnerable in the population being the less served, and poor oral health coexists with occurrence and consequences of NCDs and other health issues.

We call for recognition of the following facts:

- a) Oral conditions rank among the top 10 highest healthcare expenditures when compared to other NCDs;
- b) Oral health is inseparable from general population health;
- c) Oral health presents shared risk factors of other NCDs, such as unhealthy eating, smoking, harmful drinking and HPV infection;
- d) Poor oral health is a risk factor of malnutrition and inadequate intake of plant-based diet, and is associated with many NCDs, such as diabetes, cardiovascular disease, osteoporosis, aspiration pneumonia etc.;
- e) Public health as well as oral health promotion, like prevention and control of NCDs, requires a life-course approach for all ages;
- f) Promotion of oral health and prevention and control of NCDs via public health measures will mutually benefit each other, and integrated actions will lead to best results in improving population health, reducing health gap and reducing healthcare spending.

Herewith we recommend oral and general public health to be integrated and mutually inclusive to create best synergy and co-benefits for the society. To facilitate integration, we recommend the following priority actions:

- a) Apply a „‘health & oral health’ in all policies“ approach in the whole-of-government & whole-of-society actions in prevention & control of NCDs; take consequences and benefits in oral health into consideration in health impact assessment;
- b) Integrate oral health screening, prevention and promotion into the planning and delivery of primary health care to assure equitable and holistic provision of oral health for all;
- c) Integrate oral health into health promoting services and activities in all types of settings, such as nurseries, schools, workplaces, long-term care institutions, army, prisons, etc.;
- d) Integrate oral health into holistic health and vice versa in professional education, training and research.
- e) Integrate oral health into the efforts for legislative action on general public health including the legislation on tobacco control, harmful alcohol use, nutrition and obesity prevention, UHC, etc.
- f) Explicitly demonstrate syndemics of oral, general and social health throughout the life course in public health education, training, policy development, actions and evaluation.

If this endeavour expands we should:

- a. Develop advocacy within the Asia Pacific region through a programme
- b. Develop thought leadership via global webinars and host an annual policy meeting
- c. Foster implementation via an action plan, tailored to each country